

Cause No.: _____

Applicant: _____ § In the _____ Court
 v. § of
 Respondent: _____ § _____ County, Texas

Application for Protective Order

1 Parties

Name: _____ County of Residence: _____
 Applicant: _____
 Respondent: _____
 Respondent's address for service: _____

Check all that apply:

- The Applicant and Respondent are or were members of the same family or household.
- The Applicant and Respondent are parents of the same child or children.
- The Applicant and Respondent used to be married.
- The Applicant and Respondent are or were dating.
- The Applicant is an adult asking for protection for the Children named below from child abuse and/or family or dating violence.
- The Applicant is dating or married to a person who was married to or dating the Respondent.

2 Children: The Applicant is asking for protection for these Children under age 18:

Name:	Is Respondent the biological parent?	County of Residence:
a. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
b. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
c. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
d. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Check all that apply:

- Other children are listed on a sheet attached to this Application.
- The Children are or were members of the Applicant's family or household.
- The Children are the subject of a court order affecting access to them or their support.

3 Other Adults: The Applicant is asking for protection for these Adults, who are or were members of the Applicant's family or household, or are in a dating or marriage relationship with the Applicant.

Name:	County of Residence:
a. _____	_____
b. _____	_____

4a Other Court Cases: Are there other court cases, like divorce, custody, support, involving the Applicant, Respondent, or the Children?

Yes No

If "Yes," say what kind of case and if the case is active or completed.

- If "completed," (check all that apply):
- A copy of the final order is attached.
 - A copy of the final order will be filed before the hearing on this Application.
 - The Texas Office of the Attorney General Child Support Division has been involved with a child support case. List the agency case number for each open case, if known. Case Number: _____

- 4b Presumption of Family Violence:** Has the Respondent ever been convicted of or placed on deferred adjudication community supervision for any crime under Title 5 or Title 6 of the Texas Penal Code? (see list of crimes at the end of the kit)
- Yes No
- If "Yes," say what kind of case:

If the Respondent was convicted or placed on community supervision for a Title 5 crime, did the Court make a finding that the crime involved family violence?

Yes No

Was the crime against a child listed in this petition under Number 2 "Children"?

Yes No

Have the Respondent's parental rights to this child been terminated?

Yes No

Is the Respondent seeking or attempting to seek contact with this child?

Yes No

- 5 Grounds:** Why is the Applicant asking for this Protective Order? Check one or both:
- The Respondent committed family violence.
- The Respondent violated a prior Protective Order that expired, or will expire in 30 days or less. A copy of the Order is (*check one*): Attached, or Not available now but will be filed before the hearing on this Application

The Applicant request a **PROTECTIVE ORDER** and asks the Court to make all Orders marked with a check

6 Orders to Prevent Family Violence

The Applicant asks the Court to order the Respondent to (*Check all that apply*):

- a. Not commit family violence against any person named on page 1 of this form.
- b. Not communicate in a threatening or harassing manner with any person named on page 1 of this form.
- c. Not communicate a threat through any person to any person named on page 1 of this form.
- d. Not communicate or attempt to communicate in any manner with (*Check all that apply*):
 Applicant Children Other Adults named on page 1 of this form.
 The Respondent may communicate through: _____ or other person the Court appoints. Good cause exists for prohibiting the Respondent's direct communications.
- e. Not go within 200 yards of the (*Check all that apply*):
 Applicant Children Other Adults named on page 1 of this form.
- f. Not go within 200 yards of the residence, workplace, or school of the (*Check all that apply*):
 Applicant Other Adults named on page 1 of this form.
- g. Not go within 200 yards of the Children's residence, child-care facility, or school, except as specifically authorized in a possession schedule entered by the Court.
- h. Not stalk, follow, or engage in conduct directed specifically to anyone named on page 1 of this form that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass them, including tracking or monitoring a car or other property.

The Applicant asks the Court to:

- i. Require the Respondent to complete a battering intervention and prevention program; or if no such program is available, counseling with a social worker, family service agency, physician, psychologist, licensed therapist, or licensed professional counselor; and pay all costs for the counseling or treatment ordered.
- j. Prohibit the Respondent from taking, harming, threatening, or interfering with the care, custody, or control of the following pet, companion animal, or assistance animal: _____ (describe the animal).
- k. Require the Respondent to follow these provisions to prevent or reduce the likelihood of family violence:

The law requires a trial court issuing a protective order to prohibit the Respondent from possessing a firearm or ammunition, unless the Respondent is a peace officer actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

7 Property Orders

The Residence located at: _____

- (Check one): is jointly owned or leased by the Applicant and Respondent;
 is solely owned or leased by the Applicant; or
 is solely owned or leased by the Respondent; and the Respondent is obligated to support the Applicant or a child in the Applicant's possession.

The Applicant also asks the Court to make these orders (Check all that apply):

- The Applicant to have exclusive use of the Residence identified above, and the Respondent must vacate the Residence.
 The sheriff, constable, or chief of police shall provide a law enforcement officer to accompany the Applicant to the Residence, to inform the Respondent that the Court has ordered the Respondent excluded from the Residence, to provide protection while the Applicant takes possession of the Residence and the Respondent removes any necessary personal property, and, if the Respondent refuses to vacate the Residence, to remove the Respondent from the Residence and arrest the Respondent for violating the Court's Order.
 The Applicant to have exclusive use of the following property that the Applicant and Respondent jointly own or lease:

- The Respondent must not damage, transfer, encumber, or otherwise dispose of any property jointly owned or leased by the parties, except in the ordinary course of business or for reasonable and necessary living expenses, including, but not limited to, removing or disabling any vehicle owned or possessed by the Applicant or jointly owned or possessed by the parties (whether so titled or not).

8 Spousal Support Order

The Applicant is married to the Respondent or otherwise legally entitled to support from the Respondent and asks the Court to order the Respondent to pay support in an amount set by the Court.

9 Orders Related to Removal, Possession, and Support of Children

The Respondent is a parent of the following of the Applicant's children: _____

And, the Applicant asks for these Orders in the best interest of the people named on page 1 of this form.

Check all that apply:

- The Respondent must not remove the children from the Applicant's possession or from their child-care facility or school, except as specifically authorized in a possession schedule entered by the Court.
 The Respondent must not remove the children from the jurisdiction of the Court.
 Establish or modify a schedule for the Respondent's possession of the Children, subject to any terms and conditions necessary for the safety of the Applicant or the Children.
 Require the Respondent to pay child support in an amount set by the Court.

10 Temporary Ex Parte PROTECTIVE ORDER

Based on the information in the attached Affidavit or Declaration, there is a clear and present danger of family violence that will cause the Applicant, Children, or Other Adults named on page 1 of this form immediate and irreparable injury, loss, and damage, for which there is no adequate remedy at law. Applicant asks the Court to issue a Temporary Ex Parte Protective Order immediately without bond, notice, or hearing.

11 Ex Parte Order: Vacate Residence Immediately

The Applicant now lives with the Respondent at: _____ or has resided at this Residence within the 30 days prior to filing this Application. The Respondent committed family violence against a member of the household within the 30 days prior to the filing of this Application, as described in the attached Affidavit or Declaration. There is a clear and present danger that the Respondent is likely to commit family violence

against a member of the household. The Applicant is available for a hearing but asks the Court to issue a Temporary Ex Parte Protective Order immediately without bond, notice, or hearing:

- Granting the Applicant exclusive use and possession of the Residence and ordering the Respondent to vacate the Residence immediately, and remain at least 200 yards away from the Residence pending further Order of the Court; and
- Directing the sheriff, constable, or chief of police to provide a law enforcement officer to accompany the Applicant to the Residence, to inform the Respondent that the Court has ordered the Respondent to vacate the Residence, and to provide protection while the Applicant either takes possession of the Residence or removes necessary personal property.

✓ **12 Keep Information Confidential**

The Applicant asks the Court to keep addresses and telephone numbers for residences, workplaces, schools, and childcare facilities confidential. The Applicant asks the Court to order the Court Clerk to strike contact information for Protected People, including: addresses, mailing addresses, county of residence, telephone numbers, places of employment, businesses, child-care facilities, and schools from the public records of the Court, and maintain a confidential record of this information. The Applicants asks the Court to prohibit the Court Clerk from releasing contact information of Protected People except to the Court or to law enforcement for the purpose of entering the information into the Department of Public Safety law enforcement information system. **The Applicant asks the Court to order that all contact information of Protected People be confidential.**

- The Applicant asks the Court to order that the following person is designated as a person to receive any notice or documents filed with the Court related to the Application on behalf of the Applicant:

Name: _____
 Address: _____


- The Applicant asks the Court to order that the Applicant's address is confidential and shall only be disclosed to the Court.

WARNING: A copy of this court document will be served to the respondent with any information that you include available for public inspection. Marking the box on number 12 means that you are asking the judge to order the clerk to remove some addresses and telephone numbers from the final order in this case so that the public cannot see them. If you are requesting this, DO NOT INCLUDE this personal information in this form OR a temporary ex parte protective order form.

✓ **13 Fees And Costs**

The Applicant asks the Court to order the Respondent to pay fees for service of process, all other fees and costs of Court, and reasonable attorneys' fees, if applicable.

I have read the entire Application and it is true and correct to the best of my knowledge.

 _____
 Applicant, *Pro se*

Address where Applicant may be contacted: _____

Phone # where Applicant may be contacted: _____ Fax #: _____
 (List another address/phone if you want yours kept confidential)

AFFIDAVIT

Use this form if YOU WANT your Date of Birth and Address to REMAIN CONFIDENTIAL.

You will need to have it SIGNED BY A NOTARY.

Do NOT use the Declaration form if you use this form.

County of _____

State of Texas

My name is _____ (First Middle Last). I am _____ years old and otherwise competent to make this Affidavit. The information and events described in this Affidavit are true and correct.

1. Describe the most **recent time** the Respondent hurt you or threatened to hurt you:

2. In which county did this happen? _____

3. What date did this happen? ____/____/____

4. Was a weapon involved? Yes No If yes, what kind? _____

5. Were any children there? Yes No If yes, who? _____

6. Did anyone call the police? Yes No If yes, what happen? _____

7. Did you get medical care? Yes No If yes, describe your injuries: _____

Has the Respondent ever threatened or hurt you **before**? Describe below in detail how the Respondent threatened or hurt you, including date(s) if possible.

9. Were weapons ever involved? Yes No If yes, what kind? _____

10. Were any children there? Yes No If yes, who? _____

11. Have the police ever been called? Yes No

12. Did you ever have to get medical care? Yes No If yes, describe your injuries: _____

13. Has the Defendant ever been convicted of family violence? Yes No

If yes, list when and in which county and state the convictions occurred: _____

On ____/____/____ the Applicant _____ personally appeared before me, the undersigned notary. After being sworn, the Applicant stated that she/he is qualified to make this oath, that she/he has read the foregoing Application and Affidavit, that she/he has personal knowledge of the facts asserted, and the facts asserted are true and to the best of her/his knowledge and belief. Subscribed and sworn before me on ____/____/____.

▶ _____
Applicant signs here

▶ _____
Notary Public in and for the State of Texas

My Commission expires: _____

County of _____
State of Texas

DECLARATION

Use this form if you want your Date of Birth and Address to be public information (not confidential).

You will **NOT** need to have it signed by a notary.

Do **NOT** use the Affidavit form if you use this form.

My name is _____(First Middle Last), my date of birth is _____,
and my address is _____(Street), _____
(City), _____(State), _____(Zip Code) _____(Country) _____.

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____ day of _____(Month), _____(Year).

_____(Declarant Signature).

1. Describe the **most recent** time the Respondent hurt you or threatened to hurt you:

2. In which county did this happen? _____

3. What date did this happen? ____/____/____

4. Was a weapon involved? Yes No If yes, what kind? _____

5. Were any children there? Yes No If yes, who? _____

6. Did anyone call the police? Yes No If yes, what happened? _____

7. Did you get medical care? Yes No If yes, describe your injuries: _____

8. Has the Respondent ever threatened or hurt you **before**? Describe below in detail how the Respondent threatened hurt you, including date(s) if possible.

9. Were weapons ever involved? Yes No If yes, what kind? _____

10. Were any children there? Yes No If yes, who? _____

11. Have the police ever been called? Yes No

12. Did you ever have to get medical care? Yes No If yes, describe your injuries: _____

13. Has the Defendant ever been convicted of family violence?

If yes, list when and in which county and state the convictions occurred: _____



Applicant signs here

Cause No.: _____

Applicant: _____ § In the _____ Court

§

v.

§

of

§

§

Respondent: _____ § _____ County, Texas

Temporary Ex Parte Protective Order

Go to the court hearing on: Date: _____ Time: _____ a.m. p.m.

Court Address: _____

Findings: The Court finds from the sworn Affidavit or Declaration attached to the *Application for Protective Order* filed in this case that there is a clear and present danger that the Respondent named below will commit acts of family violence that will cause the Applicant, Children, and/or Other Adults named below immediate and irreparable injury, loss, and damage, for which there is no adequate remedy at law. The Court, therefore, enters this *Temporary Ex Parte Protective Order* without further notice to the Respondent or hearing. No bond is required.

✓ **Respondent:** The person named below is ordered to follow all Orders marked with a check.

Name: _____ County of Residence: _____

✓ **Protected People:** The following people are protected by the terms of this PROTECTIVE ORDER:

Name: _____ County of Residence: _____

Applicant: _____

Children: _____

Other _____

Adults: _____

✓ **Temporary Orders** — To prevent family violence, the Court orders the Respondent to obey all orders marked with a check.

The Respondent (person named in 1) must:

a. Not commit an act against any person named in 2 above that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places those people in fear of imminent physical harm, bodily injury, assault, or sexual assault.

b. Not communicate in a threatening or harassing manner with any person named in 2 above.

c. Not communicate a threat through any person to any person named in 2 above.

- d. Not communicate or attempt to communicate in any manner with: *(Check all that apply)*
 Applicant Children Other Adults named in **2** above. The Respondent may communicate through: _____ or other person the Court appoints.

Good cause exists for prohibiting the Respondent's direct communications.

- e. Not go within 200 yards of the *(Check all that apply)*:
 Applicant Children Other Adults named in **2** above. (except to go to court hearings)

- f. Not go within 200 yards of the Residence, workplace, or school of the: *(Check all that apply)*
 Applicant Other Adults named in **2** above.

The addresses of the prohibited locations are: *(Check all that apply)*

Deemed confidential. The Clerk is ordered to strike the information from all public court records and maintain a confidential record of the information for Court use only.

Disclosed as follows:

Applicant's Residence: _____

Applicant's Workplace/School: _____

Other: _____

g. Respondent may not go within one mile of the Applicant with a firearm.

- h. Not go within 200 yards of the Children's Residence, child-care facility, or school.

The addresses of the prohibited locations are: *(Check all that apply)*

Deemed confidential. The Clerk is ordered to strike the information from all public court records and maintain a confidential record of the information for Court use only.

Disclosed as follows:

Children's Residence: _____

Children's Child-care/School: _____

Other: _____

- i. Not stalk, follow, or engage in conduct directed specifically toward the Applicant, Children, or Other Adults named in **2** above that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass them, including tracking or monitoring a car or other property.

- j. Not remove the Children from their school, child-care facility, or the Applicant's possession.

- k. Not remove the Children from the jurisdiction of the Court.

- l. Not take, harm, or interfere with the care, custody, or control of the following pet, companion animal, or assistance animal: _____ (describe the animal).

- m. Not interfere with the Applicant's use of the Residence located at: _____, including, but not limited to, disconnecting utilities or telephone service or causing such services to be disconnected.

- n. Not interfere with the Applicant's use and possession of the following property:

- o. Not damage, transfer, encumber, or otherwise dispose of any property jointly owned or leased by the Applicant and Respondent, except in the ordinary course of business or for reasonable and necessary living expenses, including, but not limited to, removing or disabling any vehicle owned or possessed by the Applicant or jointly by the parties (whether so titled or not).

4. **Order: Vacate Residence Immediately**

The Court finds that the Residence located at: _____ (Check one):

- is jointly owned or leased by the Applicant and Respondent;
- is solely owned or leased by the Applicant; or
- is solely owned by the Respondent; and the Respondent is obligated to support the Applicant or a child in the Applicant's possession.

The Court further finds that the Applicant currently resides at the Residence, or has resided there within 30 days prior to the filing of the *Application for Protective Order* in this case, and that the Respondent has committed family violence against a member of the household within 30 days prior to the filing of the *Application for Protective Order* in this case. There is a clear and present danger that the Respondent is likely to commit family violence against a member of the household.

The Respondent is therefore ORDERED to vacate the Residence on or before: _____ a.m. p.m. on: _____ (date) and to remain at least 200 yards away from the Residence until further order of the Court. The Applicant shall have exclusive use and possession of the Residence until further order of the Court.

IT IS FURTHER ORDERED that the sheriff, constable, or chief of police shall provide a law enforcement officer to accompany the Applicant to the Residence, to inform the Respondent that the Court has ordered the Respondent to vacate the Residence, and to provide protection while the Applicant takes possession of the Residence, and if the Respondent refuses to vacate the Residence, provide protection while the Applicant takes possession of the Applicant's necessary personal property.

5 **Confidentiality of Information**

The Court Clerk is ordered to strike contact information for Protected People, including: addresses, mailing addresses, county of residence, telephone numbers, places of employment, businesses, child-care facilities, and schools from the public records of the Court, and maintain a confidential record of this information. The Clerk of the Court is prohibited from releasing contact information of Protected People except to the Court or to law enforcement for the purpose of entering the information into the Department of Public Safety law enforcement information system. **It is ordered that all contact information for the Protected People is confidential.**

- It is ordered that the following person is designated as a person to receive any notice or documents filed with the Court related to the application on behalf of the Applicant:

Name: _____

Address: _____

- It is ordered that the following person is designated as a person to receive any notice or documents filed with the Court.

6 **Go to the Court Hearing**

IT IS FURTHER ORDERED that notice issue to the Respondent to appear, and the Respondent is ORDERED to appear in person before this Court at the time and place indicated on page 1 of this form.

The purpose of this hearing is to determine whether the Court should issue the Protective Orders and other relief requested in the *Application for Protective Order* filed in this case.

7 **Duration of Order:** This Order is effective immediately and shall continue in full force and effect until twenty (20) days from the date it is signed, or further order of the Court.

8 ☐ Warning: A person who violates this order may be punished for contempt of court by a fine of as much as \$500 or by confinement in jail for as long as six months, or both.

No person, including a person who is protected by this order, may give permission to anyone to ignore or violate any provision of this Order. During the time in which this Order is valid, every provision of this Order is in full force and effect unless a court changes the Order.

If a person subject to a protective order is released from confinement or imprisonment following the date the order would have expired, or if the order would have expired not later than the first anniversary of the date the person is released from confinement or imprisonment, the order is automatically extended to expire on: (1) the first anniversary of the date the person is released, if the person was sentenced to confinement or imprisonment for a term of more than five years; or (2) the second anniversary of the date the person is released if the person was sentenced to confinement or imprisonment for a term of five years or less.

A violation of this Order by commission of an act prohibited by the Order may be punishable by a fine of as much as \$4,000 or by confinement in jail for as long as one year, or both. An act that results in family violence may be prosecuted as a separate misdemeanor or felony offense. If the act is prosecuted as a separate felony offense, it is punishable by confinement in prison for at least two years.

This Ex Parte Order signed on (date): _____ Time: _____ a.m. p.m.

Judge Presiding ► : _____

This is a Court Order. No one – except the Court – can change this Order.

IN THE _____ COURT
_____ COUNTY, TEXAS

Protective Order

Cause No. _____

Judge: _____

Applicant/Petitioner

Applicant/Petitioner Identifiers

First Middle Last

Date of Birth of Applicant: _____

And/or on behalf of minor family member(s): (list name and DOB):

Other Protected Persons/DOB:

VS.

Respondent

Respondent Identifiers

First Middle Last

Relationship to Petitioner: _____

Respondent's Address

SEX	RACE	DOB	HT	WT
EYES	HAIR	SOCIAL SECURITY NO. (Last 3 #)		

DRIVERS LICENSE NO.		STATE	EXP DATE	
Distinguishing Features: _____				

A Court hearing was held on: Date: _____ Time: _____ a.m. p.m.

THE COURT HEREBY FINDS:

That it has jurisdiction over the parties and subject matter, and the Respondent has been provided with reasonable notice and opportunity to be heard.

[] Additional findings of this order are as set forth below.

THE COURT HEREBY ORDERS:

[] That the above named Respondent be prohibited from committing further acts of abuse or threats of abuse.

[] That the above named Respondent be prohibited from any contact with the Applicant/Petitioner.

[] Additional terms of this order as set forth below.

The terms of this Order shall be effective until _____, 20_____, or as otherwise provided for in Section 15 Duration located on page 6 of this Order.

WARNINGS TO RESPONDENT:

This order shall be enforced, even without registration, by the courts of any state, the District of Columbia, any U. S. Territory, and may be enforced by Tribal Lands (18 U.S.C. Section 2265). Crossing state, territorial, or tribal boundaries to violate this order may result in federal imprisonment (18 U.S.C. Section 2262).

Only the Court can change this order.

2

Findings: All legal requirements have been met, and the Court has jurisdiction over the parties and this case. This Order is in the best interests of the Protected Person(s) and is necessary to prevent future family violence.

- The Applicant and Respondent are spouses, former spouses, parents of the same child, live-in partners, or former live-in partners, and are thus "intimate partners" as defined by 18 U.S.C. § 921(a)(32); or the applicant is dating or married to a person who was married to or dating the Respondent.
- The parties have agreed to the terms of this Protective Order.

Statutory grounds for the Protective Order have been established. (Check one or both):

- The Respondent has committed family violence against the Applicant or Children named below.
- Under Texas Family Code Section 81.0015, there is a presumption that the Respondent has committed family violence.
- The Respondent has violated a prior Protective Order that expired or will expire within 30 days.

1 Appearances: (Check any that apply):

- | Applicant | Respondent | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Appeared in person and announced ready. |
| <input type="checkbox"/> | <input type="checkbox"/> | Appeared in person and by attorney, _____, and announced ready. |
| <input type="checkbox"/> | <input type="checkbox"/> | Appeared by signature below evidencing agreement to the entry of this Protective Order. |
| | <input type="checkbox"/> | Although duly cited, did not appear and wholly made default. |

2 Protected People: The following people are protected by the terms of this Protective Order:

	Name:	County of Residence:
<input type="checkbox"/> Applicant:	_____	_____
<input type="checkbox"/> Children:	_____	_____
	_____	_____
	_____	_____
<input type="checkbox"/> Other	_____	_____
Adults:	_____	_____

3 A Record of Testimony (Check one) was made by: _____
 was waived by the parties.

4 Protective Orders — To prevent family violence, the Court orders the Respondent to obey all Orders marked with a check. ✓

The Respondent must:

- a. Not commit an act against any person named in **2** above that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places those people in fear of imminent physical harm, bodily injury, assault, or sexual assault.
- b. Not communicate in a threatening or harassing manner with any person named in 2 above.
- c. Not communicate a threat through any person to anyone named in 2 above.
- d. Not communicate or attempt to communicate in any manner with: (Check all that apply)
 Applicant Children Other Adults named in 2 above. (except through: _____)
 Good cause exists for prohibiting the Respondent's direct communications.

- e. Not go within 200 yards of the: *(Check all that apply)*
 - Applicant Children Other Adults named in 2 above.
 - (Except to go to court hearings or to exchange Children as authorized by a court order)
- f. Not go within 200 yards of the Residence, workplace or school of the: *(Check all that apply)*
 - Applicant Other Adults named in 2 above.
 - The addresses of the prohibited locations are: *(Check all that apply)*
 - Deemed confidential. The clerk is ordered to strike the information from all public court records and maintain a confidential record of the information for Court use only.
 - Disclosed as follows:
 - Applicant's Residence: _____
 - Applicant's Workplace/School: _____
 - Other: _____
- g. Not go within 200 yards of the Children's Residence, child-care facility, or school, except as authorized by a court order. The addresses of the prohibited locations are: *(Check all that apply)*
 - Deemed confidential. The clerk is ordered to strike the information from all public court records and maintain a confidential record of the information for Court use only.
 - Disclosed as follows:
 - Children's Residence: _____
 - Children's Child-care/School: _____
 - Other: _____
- h. Not stalk, follow, or engage in conduct directed specifically to any person named in 2 above that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass them, including tracking or monitoring a car or other property.
- i. Not take, harm, threaten, or interfere with the care, custody or control of the following pet, companion animal, or assistance animal: _____ *(describe the animal)*.

5 Family Violence Prevention Program

- The Respondent is ordered to enroll in, pay costs for, and enter the program checked below no later than _____ / _____ / _____, and to complete the program by _____ / _____ / _____. *(Check one)*:
 - The local Battering Intervention and Prevention Program that meets the guidelines adopted by the community justice assistance division of the Texas Department of Criminal Justice: _____

Or if no such Battering Intervention and Prevention Program is available, then:

- A counseling program recommended and conducted by the following social worker, family service agency, physician, psychologist, licensed therapist, or licensed professional counselor: _____
- The Respondent is ordered to comply with any recommendation or referral for additional or alternate counseling within seven (7) days of the recommendation, and ordered to complete any additional or alternate program recommended. The Respondent is ordered to sign a waiver for release of information upon enrollment so that participation in the program may be monitored by the Applicant and/or the Court. _____
- The Respondent must also follow these provisions to prevent family violence: _____

6 Property Orders

- The Court finds that the Residence located at: _____
 (Check one):
- is jointly owned or leased by the Applicant and Respondent;
 - is solely owned or leased by the Applicant; or
 - is solely owned or leased by the Respondent; and the Respondent is obligated to support the Applicant or a child in the Applicant's possession.
- IT IS ORDERED that the Applicant shall have exclusive use of the Residence identified above, and the Respondent must vacate the Residence no later than: _____ a.m. p.m. on: _____ (date).
- IT IS FURTHER ORDERED that the sheriff, constable, or chief of police shall provide a law enforcement officer to accompany the Applicant to the Residence, to inform the Respondent that the Court has ordered the Respondent to be excluded from the Residence, to provide protection while the Applicant takes possession of the Residence and the Respondent removes any necessary personal property, and, if the Respondent refuses to vacate the Residence, to remove the Respondent from the Residence and arrest the Respondent for violating the Court's Order.

7 Other Property Orders

- The Court finds that the Applicant and Respondent jointly own or lease the following Additional Property, and awards the Applicant the exclusive use of:
- _____
- _____

The Respondent must not damage, transfer, encumber, or otherwise dispose of the Additional Property identified above or any other property jointly owned or leased by the parties, except in the ordinary course of business or for reasonable and necessary living expenses, including, but not limited to, removing or disabling any vehicle owned or possessed by the Applicant or jointly by the parties (whether so titled or not).

8 Spousal Support Order

- IT IS ORDERED that the Respondent pay the Applicant support in the amount of \$_____ per month, with the first payment due and payable on ____ / ____ / ____ and a like payment due and payable on the ____ day of each following month until further Order of this Court. IT IS ORDERED that all payments be sent to the Applicant at the address listed below and postmarked on or before the due date for each payment:
- _____

9 Orders Related to Removal, Possession and Support of Children

The Court finds that the Respondent is a parent of the Children. The Protective Order below is in the best interests of the Applicant, Children, and/or Other Adults named in **2** above.

- Removal** — Check one or both:

The Respondent must:

- Not remove the Children from the Applicant's possession or from their child-care facility or school, except as specifically authorized in a possession schedule ordered by the Court.
- Not remove the Children from the jurisdiction of the Court.

- Possession** — Check one:

- The Applicant is granted exclusive possession of the Children, and the Respondent shall have no possession or access to the Children, unless and until further Orders are entered by the Court. This Order supersedes any previous order granting the Respondent possession or access to the Children.
- The Applicant is granted primary possession of the Children, and the Respondent may have possession of the Children pursuant to the possession schedule attached to this Protective Order as Exhibit A, subject to the terms and conditions stated herein as necessary for the safety of the Applicant and the Children. The possession

schedule hereby ordered supersedes any previous order granting the Respondent possession and access to the Children.

The possession schedule previously entered on ___ / ___ / ___, in cause number _____, styled _____, shall continue to govern the Respondent's possession and access to the Children, except that no exchanges of the Children shall occur at a prohibited location described in this Protective Order.

Child Support — Nothing in this Protective Order shall be construed as relieving the Respondent of any past or future obligation to pay child support as previously ordered. — Check one:

The Respondent is ordered to pay child support to the Applicant in the amount of \$_____ per month, with the first such payment due and payable on ___ / ___ / ___, and a like payment due and payable on the _____ day of each month thereafter for the term of this Protective Order or until further Order of the Court, whichever occurs first.

The Respondent is ordered to make all child support payments payable to the Applicant, and must mail all payments to:

Texas Child Support Disbursement Unit, P.O. Box 659791, San Antonio, TX 78265-9791

That agency will send the payment to the Applicant for the support of the Children. The Respondent must keep the child support registry informed of the Respondent's Residence and work addresses.

On this date, the Court signed an Income Withholding Order, ordering the employer and any subsequent employer of the Respondent to withhold court-ordered child support from the Respondent's earnings. **The existence of the Order for withholding from earnings for child support does not excuse the Respondent from personally making any child support payment herein, except to the extent the Respondent's employer actually makes the payment on behalf of the Respondent.**

The Child Support Order previously entered on ___ / ___ / ___, in cause number _____, styled _____, shall continue to govern the Respondent's child support obligations with respect to the children.

10 Confidentiality of Information

The Court Clerk is ordered to strike contact information for Protected People, including: addresses, mailing addresses, county of residence, telephone numbers, places of employment, businesses, child-care facilities, and schools from the public records of the Court, and maintain a confidential record of this information. The Clerk of the Court is prohibited from releasing contact information of Protected People except to the Court or to law enforcement for the purpose of entering the information into the Department of Public Safety law enforcement information system. **It is ordered that all contact information for the Protected People is confidential.**

It is ordered that the following person is designated as a person to receive any notice or documents filed with the Court related to the application on behalf of the Applicant:

Name: _____

Address: _____

It is ordered that the Applicant's mailing address is confidential and shall only be disclosed to the Court.

11 Fees and Costs

Within 60 days after this Order is signed, the Respondent must pay the Total Fees and Costs as follows:

Total to be paid: \$ _____ \$

(This includes fees for service: \$ _____ + all other Court fees and costs: \$ _____) \$

Address where Respondent must pay the Clerk of the Court with cash, cashier's check, or money order:

12 **Attorney's Fees**

Within 60 days after this Order is signed, the Respondent must pay the attorney who helped enter this Protective Order the Attorney Fees listed below. Pay with cash, cashier's check, or money order.

Attorney Fees awarded by the Court: \$ _____

Attorney's name: _____

Attorney's address: _____

Attorney (*name*) _____ shall have and recover judgment against the Respondent (*name*) _____ for \$ _____, such judgment bearing interest at _____ percent per annum compounded annually from the date this judgment and Order is signed until paid, for which let execution issue if it is not paid.

13 **Service**

This Protective Order (*Check all that apply*):

- | | |
|--|--|
| <input type="checkbox"/> Was served on the Respondent in open court. | <input type="checkbox"/> Shall be delivered to the Respondent by certified mail, return receipt requested, or by fax, to the Respondent's last known address or fax number, or in any other manner allowed by Tex. R. Civ. P. 21a. |
| <input type="checkbox"/> Shall be personally served on the Respondent. | |
| <input type="checkbox"/> Shall be mailed by the Clerk of the Court to the Respondent's last known address. | |

14 **Copies Forwarded**

Not later than the next business day, the Clerk is ORDERED to forward copies of this Protective Order and accompanying Respondent Information Form to (*Check all that apply*):

- Sheriff and Constable of _____ County, Texas.
- Police Chief of the City of _____.
- Children's child-care facility/schools listed above.
- The Title IV-D agency
- The staff judge advocate at Joint Force Headquarters or the provost marshal of the military installation to which Respondent is assigned whose address is as follows: _____.

Any law enforcement agency receiving a copy of this Protective Order MUST immediately, but not later than the 3rd business day, enter all required information into the Department of Public Safety's statewide law enforcement information system.

15 **Duration of Order**

This Protective Order is in full force and effect until:

- _____ (*this date must be no more than two years from the date this Order is signed.*)
- _____ (*duration*) This date is more than two years from the date this Protective Order is signed.

- The Court finds that the Respondent caused serious bodily injury to the Applicant or a member of the Applicant's family or household; or
- The Respondent was the subject of two or more previous Protective Orders protecting the Applicant and both of those Protective Orders contained findings that Respondent has committed family violence.
- The Court finds that the Respondent committed an act constituting a felony offense involving family violence against the Applicant or a member of the Applicant's family or household regardless of whether the Respondent has been charged with or convicted of the offense.

WARNING: A person who violates this Order may be punished for contempt of court by a fine of as much as \$500 or by confinement in jail for as long as six months, or both.

No person, including a person who is protected by this Order, may give permission to anyone to ignore or violate any provision of this Order. During the time in which this Order is valid, every provision of this Order is in full force and effect unless a court changes the Order.

If a person subject to a protective order is released from confinement or imprisonment following the date the order would have expired, or if the order would have expired not later than the first anniversary of the date the person is released from confinement or imprisonment, the order is automatically extended to expire on: (1) the first anniversary of the date the person is released, if the person was sentenced to confinement or imprisonment for a term of more than five years; or (2) the second anniversary of the date the person is released if the person was sentenced to confinement or imprisonment for a term of five years or less.

A violation of this Order by commission of an act prohibited by the Order may be punishable by a fine of as much as \$4,000 or by confinement in jail for as long as one year, or both. An act that results in family violence may be prosecuted as a separate misdemeanor or felony offense. If the act is prosecuted as a separate felony offense, it is punishable by confinement in prison for at least two years.

Interstate violation of this Protective Order may subject the Respondent to federal criminal penalties. This Protective Order is enforceable in all fifty states, the District of Columbia, tribal lands, and U.S. territories.

This Protective Order signed on (date): _____ Time: _____ a.m. p.m.

Judge Presiding  : _____

This is a Court Order. No one – except the Court – can change this Order.

Agreed Order

By their signatures below, the Applicant and Respondent agree to the entry of the foregoing Protective Order and approve all terms stated in the Order:

Applicant

Respondent

Receipt Acknowledged . The Respondent hereby acknowledges receipt of a copy of this Protective Order.

Respondent

Respondent Information for Protective Orders

If the Court grants you a Protective Order, then fill out this form and file it with the clerk. Unless otherwise noted, fill in information below for the Respondent. If you do not know the information requested, leave that section blank. Please try to provide, at a minimum, the Respondent's name, date of birth, sex, height, weight, eye color, hair color, and race. Law enforcement needs this information to serve (give) the Respondent with the Protective Order and enter the Respondent's information into the statewide law enforcement database.

If the Court does not grant you a Protective Order, then do not fill out this form.

Respondent's Name: _____

Alias (Nickname): _____

Respondent's Relationship to Applicant: _____

Respondent's Address: _____ City: _____ State: _____ Zip: _____

County: _____ Email Address: _____ Date of Birth: _____ Place of Birth: _____

SSN (last 3#) # _____ Identification Number/State: _____ / _____ Expiration Date: _____

Driver's License Number/State: _____ / _____ Expiration Date: _____

Other Identification Number: _____

Respondent is is not on active duty with the military

Sex: M F Height: _____ ft _____ in Weight: _____ lbs

Race	Eye color	Hair color	Skin
<input type="checkbox"/> American Indian or Alaskan Native (I)	<input type="checkbox"/> Black (BLK)	<input type="checkbox"/> Black (BLK)	<input type="checkbox"/> Albino (ALB)
<input type="checkbox"/> Asian Pacific Islander (A)	<input type="checkbox"/> Blue (BLU)	<input type="checkbox"/> Blond or Strawberry (BLN)	<input type="checkbox"/> Black (BLK)
<input type="checkbox"/> Black (B)	<input type="checkbox"/> Brown (BRO)	<input type="checkbox"/> Brown (BRO)	<input type="checkbox"/> Dark (DRK)
<input type="checkbox"/> White (W)	<input type="checkbox"/> Gray (GRY)	<input type="checkbox"/> Gray or partially gray (GRY)	<input type="checkbox"/> Dark Brown (DBR)
<input type="checkbox"/> Unknown (All other non-whites) (U)	<input type="checkbox"/> Green (GRN)	<input type="checkbox"/> Red or Auburn (RED)	<input type="checkbox"/> Fair (FAR)
Other: _____	<input type="checkbox"/> Hazel (HAZ)	<input type="checkbox"/> White (WHI)	<input type="checkbox"/> Light (LGT)
_____	<input type="checkbox"/> Maroon (MAR)	<input type="checkbox"/> Red or Auburn (RED)	<input type="checkbox"/> Light Brown (LBR)
	<input type="checkbox"/> Pink (PNK)	<input type="checkbox"/> Sandy (SDY)	<input type="checkbox"/> Medium (MED)
	<input type="checkbox"/> Multicolored (MUL)	<input type="checkbox"/> Completely Bald or Unknown (xxx)	<input type="checkbox"/> Medium Brown (MBR)
	Other _____	Other (style/length): _____	<input type="checkbox"/> Olive (OLV)
	_____	_____	<input type="checkbox"/> Ruddy (RUD)
Ethnicity			<input type="checkbox"/> Sallow (SAL)
D Hispanic (H)			<input type="checkbox"/> Yellow (YEL)
D Non-Hispanic (N)			<input type="checkbox"/> Unknown (XXX)
D Unknown (U)			Other _____

Other Identifying Information (Check all that apply to the Respondent and describe)

<input type="checkbox"/> Glasses _____	<input type="checkbox"/> Tattoos _____	<input type="checkbox"/> Drug/Alcohol Use _____
<input type="checkbox"/> Beard _____	<input type="checkbox"/> Scars _____	<input type="checkbox"/> Weapons _____
<input type="checkbox"/> Mustache _____	<input type="checkbox"/> Markings _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Missing front teeth _____	<input type="checkbox"/> Piercings _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bald _____	<input type="checkbox"/> Mental Health Condition _____	

Respondent's Vehicle Information: Vehicle ID # (VIN): _____ Year: ____ Make: _____ Model: _____
Color: _____ License Plate #: _____ State: _____ License Plate Year of Expiration: _____

Respondent's Employment Information (name of employer): _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Hours/Dept: _____ Supervisor: _____

Respondent's Attorney (Name): _____ Phone: _____ Address: _____
_____ City: _____ State: _____ Zip: _____

Other people who may have information to help find Respondent:

Name: _____ Phone: _____
Address: _____ Relationship: _____
Other Information: _____

Name: _____ Phone: _____
Address: _____ Relationship: _____
Other Information: _____

*****Protected Person Information*****

(Use additional pages if necessary)

Name of Protected Person: _____

Sex: M F Date of Birth: _____ SSN (last 3#) _____ County: _____

Address: _____ City: _____ State: _____ Zip: _____

Race: Indian Asian Black White Unknown **Ethnicity:** Hispanic Non-Hispanic Unknown

Employment Information (name of employer): _____

Address: _____ City: _____ State: _____ Zip: _____

Employment Information (name of employer): _____

Address: _____ City: _____ State: _____ Zip: _____

*****Protected Child Information*****

(Use additional pages if necessary)

Name of Protected Child: _____

Sex: M F Date of Birth: _____ Daycare or School Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Race: Indian Asian Black White Unknown **Ethnicity:** Hispanic Non-Hispanic Unknown

Name of Protected Child: _____

Sex: M F Date of Birth: _____ Daycare or School Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Race: Indian Asian Black White Unknown **Ethnicity:** Hispanic Non-Hispanic Unknown

**PROTECTIVE ORDER
ADDRESS FORM**

CAUSE NO: _____

280th JUDICIAL COURT

APPLICANT:

NAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP CODE: _____

RESPONDENT:

NAME: _____ SPN: _____

ADDRESS: _____

CITY/STATE: _____ ZIP CODE: _____

SCHOOL/DAYCARE:

NAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP CODE: _____

MANDATORY MILITARY INFORMATION (AS OF 9/1/11):

IS RESPONDENT A MEMBER OF THE STATE MILITARY FORCES OR CURRENTLY SERVING IN THE ARMED FORCES OF THE UNITED STATES IN AN ACTIVE DUTY STATUS?
_____ YES _____ NO

IF YES- STATE WHICH MILITARY INSTALLATION RESPONDENT IS CURRENTLY ASSIGNED AND NAME OF THE COMMANDING OFFICER:

MANDATORY TITLE IV-D INFORMATION (AS OF 9/1/13):

IS APPLICANT RECEIVING SERVICES FROM THE TITLE IV-D AGENCY IN CONNECTION WITH A CHILD SUPPORT CASE?
_____ YES _____ NO

IF YES- STATE THE AGENCY CASE NUMBER FOR EACH OPEN CASE:

Pursuant to Family Code § 82.006 and § 82.007, list all Court Orders affecting the parties that are required as part of the application. Please include CASE NUMBER and COURT:



Marilyn Burgess

HARRIS COUNTY DISTRICT CLERK

201 Caroline | P.O. Box 4651 | Houston, Texas 77210-4651 | 832-927-5800 | www.hcdistrictclerk.com

Request for Issuance of Service

CASE NUMBER: _____ CURRENT COURT: _____

Name(s) of Documents to be served: _____

FILE DATE: _____ Month/Day/Year

SERVICE TO BE ISSUED ON (Please List Exactly As The Name Appears In The Pleading To Be Served):

Issue Service to: _____

Address of Service: _____

City, State & Zip: _____

Agent (if applicable) _____

TYPE OF SERVICE/PROCESS TO BE ISSUED: (Check the proper Box)

- Citation Citation by Posting Citation by Publication Citations Rule 106 Service
- Citation Scire Facias Newspaper _____
- Temporary Restraining Order Precept Notice
- Protective Order
- Secretary of State Citation (\$12.00) Capias (not by E-Issuance) Attachment (not by E-Issuance)
- Certiorari Highway Commission (\$12.00)
- Commissioner of Insurance (\$12.00) Hague Convention (\$16.00) Garnishment
- Habeas Corpus (not by E-Issuance) Injunction Sequestration
- Subpoena
- Other (Please Describe) _____

(See additional Forms for Post Judgment Service)

SERVICE BY (check one):

- ATTORNEY PICK-UP (phone) _____ E-Issuance by District Clerk
(No Service Copy Fees Charged)
 - MAIL to attorney at: _____
 - CONSTABLE
 - CERTIFIED MAIL by District Clerk
- Note: The email registered with EfileTexas.gov must be used to retrieve the E-Issuance Service Documents. Visit www.hcdistrictclerk.com for more instructions.*
- CIVIL PROCESS SERVER - Authorized Person to Pick-up: _____ Phone: _____
 - OTHER, explain _____

Issuance of Service Requested By: Attorney/Party Name: _____ Bar # or ID _____

Mailing Address: _____

Phone Number: _____

Cause Number: _____

Applicant/Petitioner: _____

In the _____ Court

v.

of

Respondent: _____

_____ County, Texas

(Fill in the above blanks. Look at the Protective Order or contact the court for the above information.)

CONSENT TO PUBLISH OR REMOVE INFORMATION FROM PROTECTIVE ORDER REGISTRY PUBLIC VIEW

A "Protected Person" is a person who is protected by a final protective order issued by the court under Chapter 85 of the Texas Family Code or Subchapter A, Chapter 7B of the Code of Criminal Procedure.

As a Protected Person, you have the right under Chapter 72 of the Texas Government Code to request public access to certain information about your order on the Office of Court Administration's Protective Order Registry website, so long as the order has not been vacated.

If you request it, only the following information will be viewable by the public on the Registry website:

- the name of the court that issued the protective order;
- the case number (sometimes called the "cause number");
- the full name, county of residence, birth year, and race or ethnicity of the person you are protected from by the protective order (sometimes called the "Respondent"); and
- the dates the protective order was issued, was served, and expired (or will expire).

If you have previously requested that the public see the above information on the Registry website, you may later request removal of that information from the Registry website's public view. (NOTE: If more than one Protected Person has requested that the information be publicly viewable, then all those Protected Persons need to request removal for the information to be removed).

If you would like to request that the public see the above information on the Registry website, or if you have previously requested that the public see the above information and would now like to remove it from the Registry website, you need to: (1) fill in the blanks on this form; (2) sign and date this form; AND (3) file (turn in) this form with the court.

NOTE: You may file this form in person, by mail, or by using the eFile system. If using eFile, and you do NOT want other parties to be notified of this request, you MUST uncheck the other party on the Service Contacts screen.

_____ (Write the Protected Person's full name) is a Protected Person who is protected by a final protective order issued on _____ (Write the date of the Protective Order) in the cause number listed above. Respondent's full name is _____.

As a Protected Person or the parent/guardian of a Protected Person*, I _____ (Write your full name) request the information listed above be: (Check one of the following boxes)

Made available for viewing by the public on the Protective Order Registry website.

OR

Removed from public view on the Protective Order Registry website.

I declare, **under penalty of perjury**, that I am a Protected Person or the parent/guardian* of a Protected Person in the cause number listed above. (Before signing this form, make sure all the statements are true. Declaring under penalty of perjury means you can be prosecuted, go to jail, or pay a fine if any of the statements are not true.)

Protected Party/Guardian* Signature

Date

*Must not be Respondent listed in the case

List of Crimes under Texas Penal Code Titles 5 and 6

When answering question 4b on the Application for Protective Order form, look at this list to see if Respondent has been convicted or received deferred adjudication community supervision for any of the following crimes.

Title 5 Crimes

- Unlawful Restraint
- Kidnapping
- Aggravated Kidnapping
- Smuggling of Persons
- Trafficking of Persons
- Continuous Trafficking of Persons
- Continuous Sexual Abuse of a Young Child or Children
- Public Lewdness
- Indecent Exposure
- Indecency with a Child
- Invasive Visual Recording
- Assault
- Sexual Assault
- Aggravated Assault
- Aggravated Sexual Assault
- Injury to a Child, Elderly Individual, or Disabled Individual
- Abandoning or Endangering a Child
- Deadly Conduct
- Terroristic Threat
- Leaving a Child in a Vehicle

Title 6 Crimes

- Prohibited Sexual Conduct
- Interference with Child Custody
- Agreement to Abduct from Custody
- Enticing a Child
- Criminal Nonsupport
- Harboring Runaway Child
- Violation of Certain Court Orders or Conditions of Bond in a Family Violence, Sexual Assault or Abuse, Stalking, or Trafficking Case
- Violation of Protective Order Preventing Offense Caused by Bias or Prejudice
- Repeated Violation of Certain Court Orders or Conditions of Bond in the Family Violence, Sexual Assault or Abuse, Stalking, or Trafficking Case
- Sale or Purchase of Child
- Advertising for Placement of Child
- Interference with Rights of Guardian of the Person
- Continuous Violence Against the Family